BRIDGEPORT POLICE DEPARTMENT

PERMIT #:

APPLICATION FOR A PUBLIC HALL LICENSE

FORM REVISED 10/2012

Date of Application:		
Name of Hall:		
Address of Hall:		
City and State:	Zip Code:	
Telephone number of Hall:		
List all uses of Hall:		
Fine Marghall Americals	Date:	Date
Health Department Approval:	Date:	Date
In case of emergency, list contact names, addresses, and phone numbers:		
1)		
2)		
3)		
YEARLY FEE IS \$100; RENEWABLE BY OCTOBER FIRST OF EACH YEAR		
APPROVED:		